

**BOARD LETTER – SUMMARY SHEET
HEALTH AND MENTAL HEALTH SERVICES CLUSTER**

AGENDA REVIEW	5/14/2014																
BOARD MEETING	6/4/2014																
SUPERVISORIAL DISTRICT	ALL																
DEPARTMENT	MENTAL HEALTH																
SUBJECT	APPROVAL TO SUPERSEDE 67 EXPIRING LEGAL ENTITY AGREEMENTS FOR MENTAL HEALTH SERVICES FOR FISCAL YEARS 2014-15 AND 2015-16																
PROGRAM	Legal Entity Agreements for the provision of mental health services																
DEADLINES	6/30/2014																
COST & FUNDING	<p>The FY 2014-15 annual MCAs for each Legal Entity Agreement are shown on Attachment B totaling \$562,308,398 inclusive of \$21,252,721 in one time funding State MHSA revenue. The FY 2014-15 MCAs are funded from the following sources:</p> <table> <tr> <td>1) State Revenues (including MHSA):</td><td>\$243,466,489</td></tr> <tr> <td>2) Federal Revenues:</td><td>\$217,980,887</td></tr> <tr> <td> i) MCE Federal Financial Participation (FFP):</td><td>\$ 29,152,335</td></tr> <tr> <td>3) Intrafund Transfers:</td><td>\$ 16,372,492</td></tr> <tr> <td>4) NCC/Sales Tax Realignment:</td><td>\$ 47,881,874</td></tr> <tr> <td>5) 2011 Sales Tax Realignment (AB 109):</td><td>\$ 5,377,181</td></tr> <tr> <td>6) Grant :</td><td><u>\$ 2,077,140</u></td></tr> <tr> <td>Total</td><td>\$562,308,398</td></tr> </table> <p>Funding for future fiscal years will be requested through DMH's annual budget request process.</p> <p>There is no net County cost impact associated with the recommended actions.</p>	1) State Revenues (including MHSA):	\$243,466,489	2) Federal Revenues:	\$217,980,887	i) MCE Federal Financial Participation (FFP):	\$ 29,152,335	3) Intrafund Transfers:	\$ 16,372,492	4) NCC/Sales Tax Realignment:	\$ 47,881,874	5) 2011 Sales Tax Realignment (AB 109):	\$ 5,377,181	6) Grant :	<u>\$ 2,077,140</u>	Total	\$562,308,398
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PURPOSE OF REQUEST	<p>Board approval is required to supersede all DMH Legal Entity Agreements to include new and revised contract provisions. These agreements have varying terms and superseding these 67 current DMH Legal Entity Agreements will ensure the uniformity of terms and conditions in all such agreements. Also, the approval of this Board letter will allow DMH to revise the MCAs of these Legal Entity Agreements to add MHSA INN Program. The revised MCAs are shown in Attachment B.</p> <p>Additionally, Board approval will allow DMH to include MHSA INN Program funding in this supersession. The MHSA INN component, as defined in AB 1467, a Trailer Bill to the FY 2012-13 State Budget, defines the purpose of an INN project as increasing service access, particularly to underserved groups, increasing the quality and outcomes of mental health services and/or promoting interagency collaboration. Further, INN projects may introduce new mental health practices or approaches or make a change to an existing practice including adapting it for a new setting or community.</p>																
SUMMARY/ ISSUES (Briefly summarize program and potential issues or concerns. Identify changes, if any, to level of funding or staffing; how funding will be utilized and why best	<p>These LE Agreements with mental health services contractors provide for a broad range of mental health services to be delivered to severely and persistently mentally ill adults, SED children and adolescents, and the families of these mentally ill individuals, pursuant to the California Welfare and Institutions Code section 5600 et seq. These mental health services include an array of services such as assessment, evaluation, treatment, day care, pre-crisis intervention, case management, medication, respite care, living arrangements, community skill training, referrals, consultation, and community services.</p> <p>The revised LE Agreement boilerplate (Attachment A) includes all the recent countywide contracting updates and required changes such as the time off for voting provision. In addition, the revised Agreement format includes a revised Financial Exhibit which reflects a change from Title XXI State Children's Health Insurance Program (formerly Healthy</p>																

use; prior accomplishments; and for BLs involving contracts, also note changes to the contract term.)	<p>Families Program) to Title XXI Medicaid Children's Health Insurance Program, a change in the cash flow advance provision, and a change in the Negotiation Package instructions. Finally, we are also revising Attachment III, Financial Summary.</p>
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